

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>XX</i>	<i>7059</i>	<i>10/1</i>
O.I.P.E. CLASSIFIER		<i>15</i>	<i>10-27-00</i>
FORMALITY REVIEW	<i>AM</i>	<i>896</i>	<i>10-27-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	✓ 10/14/00
2	✓ 10/14/00
3	✓
4	✓
5	✓
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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